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CONFIRMATION NO. 8383

<b>SERIAL NUMBER</b> 09/391,294	<b>FILING OR 371(c) DATE</b> 09/07/1999 <b>RULE</b>	<b>CLASS</b> 052	<b>GROUP ART UNIT</b> 3635	<b>ATTORNEY DOCKET NO.</b> CBC-122-C
<b>APPLICANTS</b> RICHARD C. WILSON, WEST BLOOMFIELD, MI; PATRICK M. CULPEPPER, DOVER, OH;				
<b>** CONTINUING DATA *****</b> This application is a REI of 08/639,698 04/29/1996 PAT 5,664,376 <i>advised</i> <b>** FOREIGN APPLICATIONS *****</b> <i>none 2/12/96</i>				
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b> <b>** 09/22/1999</b>				
Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <i>[Signature]</i> Initials	<b>STATE OR COUNTRY</b> MI	<b>SHEETS DRAWING</b> 2	<b>TOTAL CLAIMS</b> 20  <b>INDEPENDENT CLAIMS</b> 5
<b>ADDRESS</b> ANDREW R BASILE YOUNG & BASILE PC 3001 WEST BIG BEAVER ROAD SUITE 624 TROY, MI 480843107				
<b>TITLE</b> CORNER POST SUPPORT MEMBER				
<b>FILING FEE RECEIVED</b> 641	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	